	Case 1.13-cv-07572-whP Document 50 Filed 02/04/14 Page 2 017
1	hereof on behalf of Genevia Al-Rasul, Shvodra Anderson, Tamelcia D. Brown, Annette
2	Martin and Claudia Villamil.
3	
4	Dated: February 4, 2014
5	
6	Leon Greenberg, Esq.
7	/S/ Leon Greenberg
8	By: Leon Greenberg, Esq. 2065 South Jones Boulevard F 4
9	Las Vegas, NV 89146 (702) 383-6085
10	Leon Greenberg, Esq. 2965 South Jones Boulevard E-4 Las Vegas, NV 89146 (702) 383-6085 leongreenberg@overtimelaw.com Attorney for Plaintiffs
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2	UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK
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4	SABRINA PENCEAL, et al. Docket No.: 13-CV-7572-WHP
5	Plaintiffs, vs.
6	EMPIRE BEAUTY SCHOOL INC., et
7	al., CONSENT TO JOIN CASE UNDER 29 U.S.C. § 216(b) Defendants.
8	Defendants.
9	By signing below:
10	1. I agree to join this case under 29 U.S.C. § 216(b) to make a
11	claim for unpaid minimum wages under the Fair Labor Standards Act;
12	2. State that, to the best of my knowledge, I performed work in an
13	Empire Beauty School Salon within the three years prior to the date I have signed this consent form and I was not paid
14	anything, except possibly tips from customers, for that work;
15	3. Understand that my attorney in this case will be Leon Greenberg of 2965 South Jones Boulevard Suite E-4, Las Vegas, Nevada,
16	89146, (702) 383-6085, and such other attorneys as he may associate with. I understand my attorney shall only receive a
17	fee for representing me if money is collected on my claim and the amount of his fee shall be decided by the Court. I
18	understand that fee, if any, will be paid by defendants in this case or as a percentage of the amount collected for me.
19	
20	4. I am authorizing the named plaintiffs in this case to act as my agents and make decisions about this case for me. I also
21	understand that the Court shall have to review and approve any proposed settlement of my claim and any payment to my attorney.
ı	Alamaia de Rosa D 12/24/102
22	SIGNATURE Date
23	Genevia Al-Pasul (609)2029492
24	Printed Name Telephone (optional)
25	Mailing Address Mailing Address Mailing Address Mailing Address Mailing Address
26	Bridgeton NJ 08302 Carelspring, NJ
27 28	City) State Zip Code Location of Beauty School You Attended (City, State)

CONSENT TO JOINDER

Shvodra Anderson

by signing below, hereby consents to join this case as a plaintiff pursuant to 29 U.S.C. 216(b).

Shvodra Anderson

1	UNITED STATES DISTRICT COURT
2	SOUTHERN DISTRICT OF NEW YORK
3	SABRINA PENCEAL, et al. Docket No.: 13-CV-7572-WHP
4	Plaintiffs, vs.
5	EMPIRE BEAUTY SCHOOL INC., et
6	al., CONSENT TO JOIN CASE UNDER 29 U.S.C. § 216(b)
7	Defendants.
8	By signing below:
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13	except possibly tips from customers, for that work;
14	3. Unless I check the "do not contact box" below, I am authorizing the attorney for certain plaintiffs in this case, Leon
15	Greenberg of 2965 South Jones Boulevard Suite E-4, Las Vegas, Nevada, 89146, (702) 383-6085, to contact me by mail about
16	becoming my attorney in this case. I understand I am not required to agree to have Leon Greenberg be my attorney in this
17 18	case and by signing this form I am not agreeing to retain Leon Greenberg as my attorney in this case.
	4. I am authorizing the named plaintiffs in this case to act as my
19 20	agents and make decisions about this case for me. I also understand that the Court shall have to review and approve any proposed settlement of my claim.
21	Tameleya Di Brong 1/18/14
22	SIGNATURE
23	
24	SSIS ROSWELL RN ANT TIO
	Mailing Address E-mail (optional)
25	
26	City State Zip Code Location of Beauty School You Attended
27	DO NOT (City, State) CONTACT BOX BY CHECKING THE "DO NOT CONTACT BOX" TO THE LEFT OF
28	THIS TEXT I AM DECLINING TO AUTHORIZE FURTHER COMMUNICATIONS FROM LEON GREENBERG TO ME

1	
2	UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK
3	x
4	SABRINA PENCEAL, et al. Docket No.: 13-CV-7572-WHP
5	Plaintiffs, vs.
6	EMPIRE BEAUTY SCHOOL INC., et
7	al., CONSENT TO JOIN CASE UNDER 29 U.S.C. § 216(b)
	Defendants.
8	<u>X</u>
9	By signing below:
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11	claim for unpaid minimum wages under the Fair Labor Standards Act;
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14	anything, except possibly tips from customers, for that work;
15	3. Understand that my attorney in this case will be Leon Greenberg
	of 2965 South Jones Boulevard Suite E-4, Las Vegas, Nevada, 89146, (702) 383-6085, and such other attorneys as he may
16	associate with. I understand my attorney shall only receive a fee for representing me if money is collected on my claim and
17	the amount of his fee shall be decided by the Court. I understand that fee, if any, will be paid by defendants in this
18	case or as a percentage of the amount collected for me.
19	4. I am authorizing the named plaintiffs in this case to act as my
20	agents and make decisions about this case for me. I also understand that the Court shall have to review and approve any
21	proposed settlement of my claim and any payment to my attorney.
22	Comette Martin
23	SIGNATURE Date
	Amethe Martin
24	Printed Name Telephone (optional)
25	1907 Village Brook Dr. Ad. C Mailing Address E-mail (optional)
26	Charlotte NC 28210 Matthew NC
27	City State Zip Code Location of Beauty
28	School You Attended (City, State)

1	UNITED STATES DISTRICT COURT
2	SOUTHERN DISTRICT OF NEW YORK
3	SABRINA PENCEAL, et al. Docket No.: 13-CV-7572-WHP
4	Plaintiffs,
5	VS.
6	EMPIRE BEAUTY SCHOOL INC., et al., CONSENT TO JOIN CASE
7	UNDER 29 U.S.C. § 216(b) Defendants.
8	Bý signing below:
9	
10	1. I agree to join this case under 29 U.S.C. § 216(b) to make a claim for unpaid minimum wages under the Fair Labor Standards Act;
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15	Greenberg of 2965 South Jones Boulevard Suite E-4, Las Vegas, Nevada, 89146, (702) 383-6085, to contact me by mail about
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17 18	case and by signing this form I am not agreeing to retain Leon Greenberg as my attorney in this case.
	4. I am authorizing the named plaintiffs in this case to act as my
19	agents and make decisions about this case for me. I also understand that the Court shall have to review and approve any
20	proposed settlement of my claim. Clarcha Cellal Jan 31-2014
22	SIGNATURE Date
23	Claudia Villamil Printed Name Telephone (optional)
24	
25	Mailing Address E-mail (optional)
26	Oment NJ. NJ 07628 4806 N. University Dr. City State Zip Code Location of Beauty 3331
27	State Zip Code Location of Beauty 3331 School You Attended (City, State)
28	DO NOT CONTACT BOX BY CHECKING THE "DO NOT CONTACT BOX" TO THE LEFT OF THIS TEXT I AM DECLINING TO AUTHORIZE FURTHER
~~	COMMUNICATIONS FROM LEON GREENBERG TO ME